UNITED STATES OF AMERICA DECLARATION & POWER OF ATTORNEY FF36456/04

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ATTORNEY DOCKET NO. 0641-0260P

(Status - patented, pending, abandoned)

PLEASE NOT YOU MUST COMPLETE THE FOLLOWING:

## MBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I

| Application(s):                            | (Application Number)   | (Filing Date)  | (Status - patente  | d, pending, abandone                       | :d)                         |  |
|--|--|--|--|--|-----------------------------|--|
| nsert Prior U.S.                           | I hereby claim the benefit under Title 35, United part application(s) listed below and, insofar as the and/or PCT application in the manner provided information which is material to the patentability filing date of the prior application and the national actions.                 | subject matter of each of the<br>by the first paragraph of Title<br>as defined in Title 37, Code | e claims of this application is not disc<br>e 35, United States Code, §112, I act<br>e of Federal Regulations, §1.56 which | losed in the prior U<br>knowledge the duty | nited States<br>to disclose |  |
| nsert Requested nformation:                | Country  |  |  | e of Filing (Month /                       |                             |  |
|  | All Foreign Applications, if any, for any Pate the Filing Date of this Application:  |  |  |  |                             |  |
|  | (Application Number)   |  |  | (Filing Date)                              |                             |  |
| Application(s):                            | (Application Number)   |  |  | (Filing Date)                              |                             |  |
| nsert Provisional                          | I hereby claim the benefit under Title 35, Unite   | ed States Code, §119(e) of a   | ny United States provisional applic  | cation(s) listed beli                      | ow.                         |  |
|  | (Number)   | (Country)  | (Month / Day / Year Filed)   | Yes  | □<br>No                     |  |
|  | (Number)   | (Country)  | (Month / Day / Year Filed)   | Yes  | □<br>No                     |  |
|  | (Number)   | (Country)  | (Month / Day / Year Filed)   | ☐<br>Yes                                   | No                          |  |
| nformation:                                | (Number)   | (Country)  | (Month / Day / Year Filed)   | Yes  | No                          |  |
| nsert Priority                             | Prior Foreign Application(s) 2003901010 At   | т  | 6 March 2004   | Priority                                   | _                           |  |
|  | a filing date before that of the application on  | which priority is claimed.   |  | ,  |                             |  |
|  | I hereby claim foreign priority benefits<br>or inventor's certificate listed below and have  | also identified below any  | foreign application for patent or  | ign application(s)<br>inventor's certific  | for paten<br>ate having     |  |
|  | application in any country foreign to the Unite<br>more than twelve months (six months for des<br>on this invention has been filed in any count<br>representatives or assigns, except as follows.  | ed States of America on an<br>igns) prior to this applicat                                       | application filed by me or my leg<br>ion, and that no application for pa   | al representatives<br>itent or inventor's  | or assign:<br>certificate   |  |
|  | I do not know and do not believe the sar<br>thereof, or patented or described in any printe<br>prior to this application, that the same was not<br>application, that the invention has not been  | ed publication in any coun<br>t in public use or on sale in                                      | try before my or our invention the United States of America more   | ereof or more tha<br>re than one year p    | n one yea<br>rior to thi    |  |
|  | by any amendment referred to above.  I acknowledge the duty to disclose inform §1.56.  |  |  |  | •                           |  |
| •  | I hereby state that I have reviewed and unc  | derstand the contents of the   | above identified specification, inclu  | uding the claims, a                        | is amendec                  |  |
| ۵  | amended on   |  |  | (if applicable)                            |                             |  |
| Attached:                                  | International Application Number   | •  |  |  |                             |  |
| nformation - For Use Without Specification | and amended on the specification was filed on  |  | ( if ap  | -  | -                           |  |
|  | United States Application Number   | 10/791,860   |  | ;  |                             |  |
| ill in Appropriate                         | the specification was filed on   | 4 March 2004   |  | as   | •                           |  |
| •  | the specifications of which is attached hereto. If n and/or the following:   | ot attached hereto, the applic   | cation is identified by the attorney do  | cket number as set                         | forth above                 |  |
| nsert Title:                               | REGULATOR OF APOPTOSIS AN  | ID CELL PROLIFE  | RATION   |  |                             |  |
| •  | verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: |  |  |  |                             |  |

(Filing Date)

(Application Number)

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

DI EASE NOTE

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

or CUSTOMER NO. 02292

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

| YOU MUST                               |  |   | ·                    |             | •         |  |  |  |
|--|--|---|----------------------|-------------|-----------|--|--|--|
| COMPLETE THE                           |  |   |                      |             |           |  |  |  |
| FOLLOWING:                             |  |   |                      |             |           |  |  |  |
| Full Name of First or                  | GIVEN NAME   | FAMILY NAME   | INVENTOR'S SIGNATURE |             | DATE:     |  |  |  |
| Sole Inventor: Insert Name of Inventor | HUANG  | BING-REN  |                      |             | 1 5/12/w/ |  |  |  |
| Insert Date This                       | HUANG BING-KEN   |   | Bigren Huong         |             | 1 / 1/04  |  |  |  |
| Document is Signed                     | Residence (City, State & Country)  |   |                      | CITIZENSHIP | 1         |  |  |  |
| Insert Residence Insert Citizenship    | Chao Yang District, Beijing, China   |   |                      | Chinese     |           |  |  |  |
| Insert Mailing Address                 | MAILING ADDRESS (Complete Street Address including City State & Country) 905, 34 Building, Hua Wei Xi Li, Chao Yang District, Beijing 100029 China |   |                      |             |           |  |  |  |
| Full Name of Second                    | GIVEN NAME   | FAMILY NAME   | INVENTOR'S SIGNATURE | /           | DATE: 1   |  |  |  |
| Inventor, if any:                      | ZHOU   | XIN-FU  | Sund                 | 7           | 15/3/04   |  |  |  |
| see above                              | Residence (City, State   | e & Country)  | 7                    | CITIZENSHIP |           |  |  |  |
|  | Seacombe Heights, South Australia, Australia   |   |                      | Australian  |           |  |  |  |
|  | MAILING ADDRESS (Complete Street Address including City, State & Country)  |   |                      |             |           |  |  |  |
|  | 123' Braeside Ave, Seacombe Heights, South Australia, 5047, Australia  |   |                      |             |           |  |  |  |
| Full Name of Third<br>Inventor, if any | GIVEN NAME   | FAMILY NAME   | INVENTOR'S SIGNATURE |             | DATE*     |  |  |  |
| see above                              | Residence (City, State   | e & Country)  |                      | CITIZENSHIP |           |  |  |  |
|  | (3.9)  |   |                      |             |           |  |  |  |
|  | MAILING ADDRESS  | ILING ADDRESS (Complete Street Address including City, State & Country) |                      |             |           |  |  |  |
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|  | 00/51/ 1/11/5  | 51140714145   | TIMESTER CONTINUES   |             | DATE      |  |  |  |
| Full Name of Fourth Inventor, if any   | GIVEN NAME   | FAMILY NAME   | INVENTOR'S SIGNATURE |             | DATE*     |  |  |  |
| see above                              | Residence (City, State   | e & Country)  |                      | CITIZENSHIP |           |  |  |  |
| ٠                                      |  |   |                      |             |           |  |  |  |
|  | MAILING ADDRESS (Complete Street Address including City, State & Country)  |   |                      |             |           |  |  |  |
|  |  |   |                      |             |           |  |  |  |
| Full Name of Fifth<br>Inventor, if any | GIVEN NAME   | FAMILY NAME   | INVENTOR'S SIGNATURE |             | DATE*     |  |  |  |
| inventor, ii arry                      |  |   | ,                    |             |           |  |  |  |
| see above                              | Residence (City, State   | e & Country)  |                      | CITIZENSHIP |           |  |  |  |
|  | , , , , , , , , , , , , , , , , , , ,  |   |                      |             |           |  |  |  |
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| Page 2 of 2<br>(Revised 01/02)         |  |   |                      |             |           |  |  |  |
| (Nevisca Olioz)                        |  | _   |                      |             |           |  |  |  |